

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 09, 2005 8:00 am
Secretary of State

04-14-2005 90032 034 ****50.00

DOCUMENT # L04000005157 1. Entity Name BELAGIO CAR & LIMOUSINE SERVICE, LTD. CO.					
Principal Place of Business 8016 SANDPOINT BOULEVARD ORLANDO, FL 32819 US			Mailing Address 8016 SANDPOINT BOULEVARD ORLANDO, FL 32819 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WEEKS, GEORGE R 8016 SANDPOINT BOULEVARD ORLANDO, FL 32819			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to: Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WEEKS, GEORGE R 8016 SANDPOINT BOULEVARD ORLANDO, FL 32819 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:			Date: 4/12/05 Tax ID #: 20-0615112 Daytime Phone #: 407-370-2240		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

30005732



04092005 Chg-LLC CR2E083 (10/03)

4. FEI Number **20-0615112** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required